PTO/SBOB (08-03)
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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875  |   |   |             |   |                  |                    |                        | Application or Docket Number  09940 8@ |   |                        |
|--|---|---|-------------|---|------------------|--------------------|------------------------|--|---|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |             |   |                  |                    | ENTITY                 | OR                                     | OTHER<br>SMALL                          | THAN<br>ENTITY         |
|  | FOR   | NUMBE                                     | R FAED      | NUMBE                                       | NUMBER EXTRA     |                    | FEE                    |  | RATE                                    | FEE                    |
| (37 (  | CFEE<br>SFR 1.16(a))  |   |             |   |                  |                    | 3                      | CR                                     |   | \$                     |
|  | AL CLAIMS<br>CFR 1.16(c))                                       |   | minus 20    |   |                  | × 5                |                        | CR                                     | x s                                     |                        |
|  | PENDENT CLAIM<br>DER 1.18(b))                                   | AS  | minus 3 = - |   |                  | x 3o               |                        | OR                                     | x \$*                                   |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT (37   |   |   |             | 1 CFR 1.18(0)                               |                  | + 5                |                        | OR                                     | +=                                      |                        |
| 'If the difference in column 1 is less than zero, enter 'U' in column 2  |   |   |             |   |                  | TOTAL              |                        | <b>O</b> R                             | TOTAL                                   |                        |
| CLAIMS AS AMENDED - PART II  |   |   |             |   |                  |                    |                        |  |   |                        |
| 11   | 2105  | (Column 1)                                |             | (Column 2)                                  | (Column 3)       | SMALL              | ENTITY                 | ,9R                                    | OTHER SMALL                             |                        |
| ENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE               | ADOL<br>TIGORAL<br>FEE |  | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total<br>(37 CFR L14(4))  | . 8                                       | * Minus     | _ 23  | *                | x :                |                        | CR                                     | x \$=                                   |                        |
| S  | Independent<br>(37 CFR 1.18(s))                                 | · 2                                       | Minus       | - 3   | •                | x 5                |                        | OR                                     | x 5                                     |                        |
| AM   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) |   |             |   |                  | +5                 |                        | CR                                     | +5                                      |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |             | TOTAL<br>ADO'L FEE                          |                  | σ <b>R</b>         | TOTAL<br>ADD'L FEE     |  |   |                        |
| 6  | (Column 1) (Column 2) (Column 3)                                |   |             |   |                  |                    |                        | •                                      | , |                        |
| 8  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE               | ADDI-<br>TIONAL<br>FEE |  | RATE                                    | ADDI-<br>TIONAL<br>PEE |
| AMENDMENT  | Total<br>(37 CFR L NE(e))                                       | . 53                                      | Minus       | <del>-</del> 32                             | •                | X 6                |                        | CR                                     | × 5=                                    |                        |
| EN   | Independent<br>(37 CFR L180))                                   | . 2                                       | Minus       | <del>~ 5</del>                              | 7                | × 5                |                        | OR.                                    | x \$=                                   |                        |
| ₩  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) |   |             |   |                  | +1                 |                        | CR                                     | + s =                                   |                        |
| ·  |   |   |             |   |                  | TOTAL<br>ADD'L FEE |                        | OR                                     | TOTAL<br>ADD'L FEE                      |                        |
| 12   | <u>-22-01</u>   | (Column 1)                                |             | (Column 2)                                  | (Column 3)       |                    |                        |  |   |                        |
| ENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE               | ADDI-<br>TIONAL<br>FEE |  | RATE                                    | ADDI-<br>TIONAL<br>FEE |
| OME  | Total<br>car com uneca  | .23                                       | Minus       | " 22  | 2                | X 5=               |                        | CR                                     | x s=                                    |                        |
| ENDM   | independent<br>(37 CFR 1.18(b))                                 | ග   | Minus       | 5   | •                | X 8                |                        | <b>OR</b>                              | × 2\                                    |                        |
| AM   | RRST PRESENTATION OF MALTIPLE DEPENDENT CLASM (37 CFR 1.16(d))  |   |             |   |                  | +:=                | 1                      | OR                                     | • • •                                   |                        |
| TOTAL TOTAL ADD'L FEE OR ADD'L FEE   |   |   |             |   |                  |                    |                        |  | TOTAL<br>ADD'L FEE                      |                        |
| If the entry in column 1 is less than the entry in column 2, write "O" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20". |   |   |             |   |                  |                    |                        |  |   |                        |

The Teighest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This todaction of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form endor suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commissioner, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-809-PTO-9199 and select option 2.